

## Amended FY 2007 & FY 2008 Program Budgets

Presentation to the Board of Community Health August 10, 2006

#### **Agenda**

#### ı. MEDICAID

- A. Snap Shot of Medicaid
- B. Cost Management to Date
- c. Fiscal Status

#### II. PEACHCARE FOR KIDS

- A. Snap Shot of PeachCare
- B. Items Impacting Fiscal Status
- c. FY2007 Federal Fund Deficit
- D. Fiscal Status

#### III. STATE HEALTH BENEFIT PLAN

- A. Snap Shot of SHBP
- B. Plan Changes to Date
- c. Fiscal Status

#### IV. GOVERNOR'S BUDGET INSTRUCTIONS TO DCH

#### **Snap Shot of Medicaid**

- Georgia Medicaid serves 1.3 million Georgians
- Total budget \$7.7 billion, including \$2.3 billion state funds

#### Medicaid Fee For Service:

- Foster Care
- · Aged, Blind and Disabled
- Nursing home & long term care
- Home & Community Based Waiver

#### Medicaid Managed Care:

- Low Income Medicaid for Children and Adults
- Right from the Start Medicaid for Children & Pregnant Women
- Breast and Cervical Cancer Program participants



#### FY 2004 - 2005

- Pharmacy Program
  - □ Preferred Drug List
  - □ Supplemental Rebates
  - Quantity Limits
- Outpatient hospital reimbursement reduced

#### **FY 2006**

- Care Management
   Organizations Statewide
   capitated program for Low
   Income Medicaid and
   PeachCare for Kids
- Disease Management for select Aged, Blind, and Disabled members

#### FY 2006 (continued)

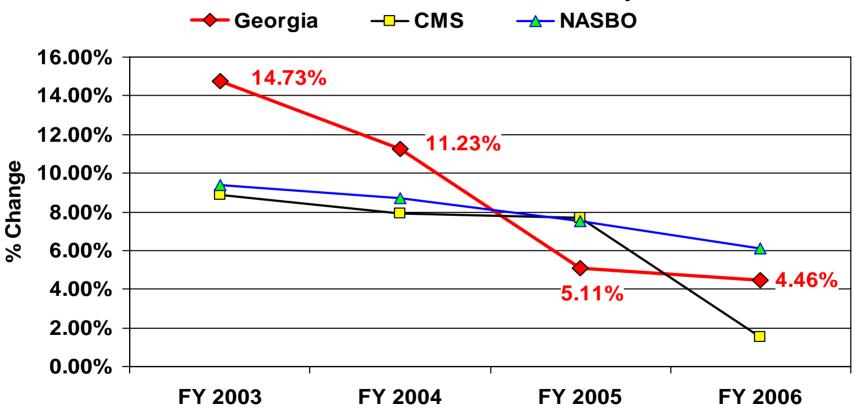
- Eligibility Criteria more stringently applied
  - Emergency Medical Assistance
  - □ Katie Beckett (FY 2005)
  - Proof of Citizenship and Income
  - Asset Transfer for Long Term Care
- Medicare Part D implementation

#### **FY 2007**

- Administrative Services for non-CMO members
  - Clinical Reviews
  - Fraud and Abuse
  - Level of Care Determination

#### **Impact of Medicaid Cost Management**

#### **Annual Increases in Medicaid Benefit Expenditures**



CMS/NASBO SOURCE: Medstat FY 2006 Cost Driver Report

DCH SOURCE: DCH July 2006 Projections

## Medicaid as a Percentage of Total Appropriations - 2005

				GA Rank	
Agency	Georgia	Southeast	National	SE*	Nat'l
K-12 Education	25.5%	19.5%	21.9%	1	8
Medicaid	19.1%	22.4%	22.5%	9	34
Higher Education	18.8%	13.6%	10.8%	2	7
Transportation	5.5%	8.4%	8.1%	12	46
Corrections	3.9%	2.8%	3.4%	1	11
Public Assistance	1.8%	0.8%	2.0%	2	14
All Other	25.4%	32.5%	31.3%	10	43

NOTE: Does not include capital outlay appropriations

SOURCE: 2004 NASBO Survey

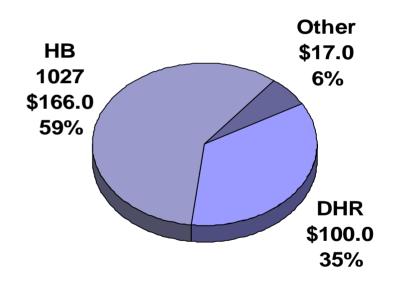
<sup>\*</sup> Of 12 States (AL, AR, FL, GA, KY, LA, MS, NC, SC, TN, VA, WV)



#### **FY 2006**

- Incurred expense projected to be
   4.5% higher as compared to FY 2005
  - Medicaid enrollment increase of 1.67%
  - Increase in other agency funded programs (waivers)
  - Increase in physician and inpatient services
  - Decreases in net drug expenses from Part D
  - Reduction in interim payments for outpatient hospital services

## FY 2006 Benefits Carry Forward



#### Estimated FY 2007 Carry Over: \$283 million\*

<sup>\*</sup>Revenue minus cash expenditures = amount that may be carried over

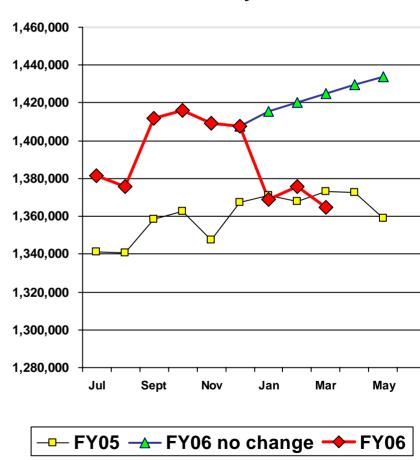
<sup>\*</sup>Final FY 2006 balance sheet not available until September 2006

#### **Current Fiscal Status (FY 2007)**

#### **FY 2007**

- Incurred expense projected to be 4.3% higher as compared to FY 2006
  - □ **1.22%** growth in enrollment
  - PMPM reduced due to managed care implementation
- Likely that appropriations are enough to cover projected cash expenditures (as of 7/06)
- Areas that could change 07 status:
  - Any change in estimated FY 2006 final carry forward amount
  - Enrollment changes from CY 06 eligibility initiatives
  - ROI of medical management of aged, blind, and disabled populations

#### **Medicaid Monthly Enrollment**



#### **Projected Future Fiscal Status (FY 2008)**

#### **FY 2008**

- Incurred benefits expense projected to be 5.8% higher (\$391.7 in Total Expense) as compared to FY 2007
- Growth in State Fund Need disproportionately more than Growth in Total Fund Need

Estimated \$250 - \$300 million in Medicaid Benefit state funds will be needed for FY 2008

#### WHY?

- No more carry forward funding left to bring into FY 2008
   (Compared to the \$166 million in state matching funds budgeted in FY 2007 per HB 1027)
- □ Projected **3.75**% enrollment growth ~50,000 members
- □ Assume inflationary growth in CMO capitation rates

## PeachCare for Kids



#### **Snap Shot of PeachCare**

- PeachCare for Kids serves <u>250,000</u> Children
- Comprehensive health care program for uninsured children living in Georgia whose family income is at or below 235% FPL.
- The health benefits include primary, **preventive**, specialist, dental care and vision care. PeachCare also covers hospitalization, emergency room services, prescription medications and mental health care.
- Georgia ranks fourth nationally in numbers of enrolled children.
   Only California, New York and Florida have enrolled more children.
- FY 2007 Budget = \$249,664,212
- Federal Match: 73%



#### PeachCare: Items Impacting Fiscal Status

#### Enrollment

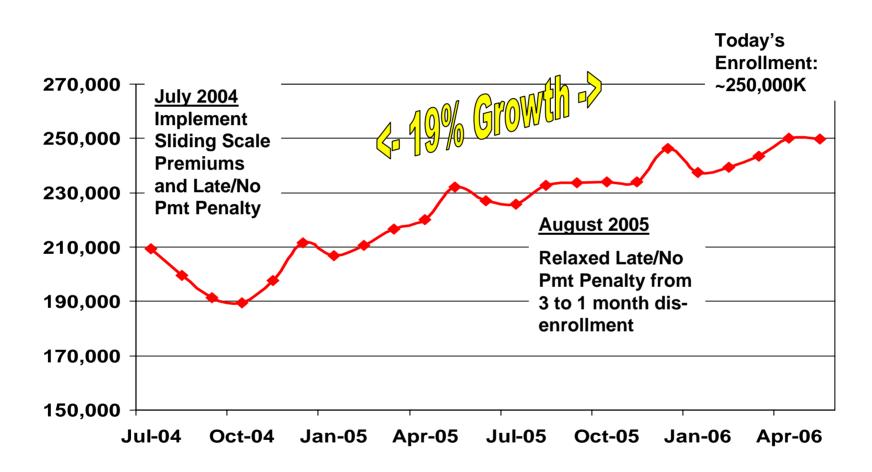
- □ 19% increase in average monthly enrollment since FY 2005
- PeachCare as a percentage of all children served by DCH is growing
  - Suggests: Children moving from Medicaid to PeachCare?
  - "Although public coverage in Georgia is slightly lower than in the rest of the nation, coverage under the S-CHIP program (called PeachCare for Kids in Georgia) is substantially higher in Georgia than in the rest of the country (3 percent versus 1 percent)." (Sources of Health Insurance Coverage in Georgia 2004, Centers for Health Services Research, GSU)

#### Conversion to Capitation

- PMPM higher in CMO than in FFS
  - Based on bids of CMO's; actuarially validated by Mercer
  - Cost of CMO Quality Assessment Fee new to PMPM
  - Cost in PeachCare offset by savings in Medicaid, resulting in a net savings for both programs
- Cash to accrual basis change- one time cost in federal funds needed in FY 2007 to offset change

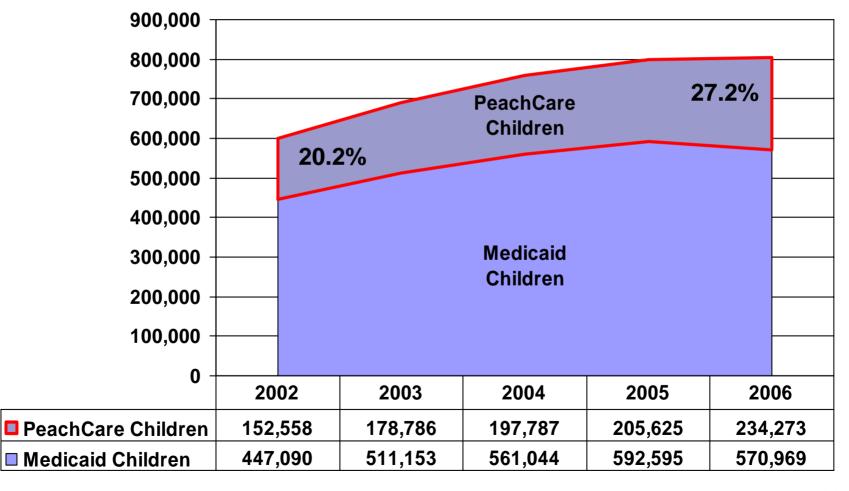
#### Limited Federal Funds

#### PeachCare for Kids Monthly Enrollment History



## Children Covered By DCH Public Programs

Average Monthly Enrollment Children 0 -18



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#### **Federal Funds - SCHIP Allotment**

#### **The Purpose of SCHIP:**

As stated in its authoring legislation (BBA 97; Public Law 105-33): "The purpose of this title is to provide funds to States to enable them to initiate and expand the provision of child health assistance to uninsured, low-income children ..."

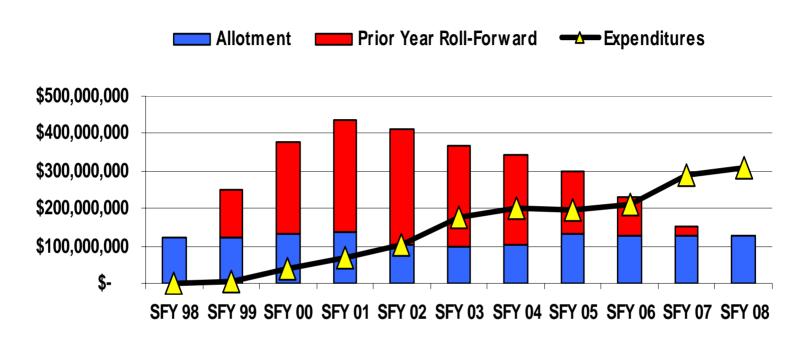
#### The Issue:

In spite of there being over \$1 Billion in surplus federal funds nationwide, several states including Georgia will have a significant deficit of federal funding this year while attempting to continue to address the needs of low income children.

#### WHY? The SCHIP allotment formula:

- Unchanged since its creation in 1997/98
- Does not consider maintenance of effort
- Not reviewed often enough to consider policy and population changes
- States have a long time to spend surplus

#### **Georgia's Federal Fund Deficit**



SFY	Allotment	Prior Year Roll- Forward	Expenditures	Deficit
SFY 04	\$ 103,892,954	\$ 240,977,573	\$ 199,362,901	\$ 145,507,626
SFY 05	\$ 130,915,014	\$ 168,158,423	\$ 197,281,627	\$ 101,791,810
SFY 06	\$ 129,457,875	\$ 101,791,810	\$ 210,567,421	\$ 20,682,264
SFY 07	\$ 129,457,875	\$ 20,682,264	\$ 290,782,063	\$ (140,641,925)
SFY 08	\$ 129,457,875	\$ 0	\$ 308,127,935	\$ (178,670,060)

#### Federal Funds - SCHIP Allotment

#### **The Federal Solutions:**

- 1- Redistribute current national surplus: Evaluate current status of federal funds in the states i.e. states with immediate funding need because of a deficit in federal funds and those states able to share a portion of their unused federal allotments.
- 2- Federal Legislation to shorten the funding cycle from 3 to 2 years allowing more timely review of state needs, deficits and surpluses for redistribution.
- 3- **Develop a new allotment formula**. See the description of the components of the current formula below.

#### The new formula should include:

- A) Maintenance of effort funds for children already in SCHIP programs.
- B) Mechanisms to ensure a more accurate count of the uninsured & those with low incomes.
- C) A determination if a more relevant measure can be used in determining the "cost factor" part of the formula.

#### PeachCare for Kids Fiscal Status

State Fund Need:	FY 2007A	FY 2008
State fund shortfall (accrual)	\$12.2	\$18.3
Fund federal share of PeachCare due to depletion of federal allotment	\$ 140.6	\$178.7
TOTAL	\$152.8	\$197.0

•FY 2007 Projected Enrollment Growth: 7.45%

•FY 2008 Projected Enrollment Growth: 6.9%

•FY 2008 Project PMPY Growth for CMO Inflation Adjustment

Federal Funds Projected Cash Depletion Date: January 2007

## State Health Benefit Plan

### 1

#### **Snap Shot of SHBP**

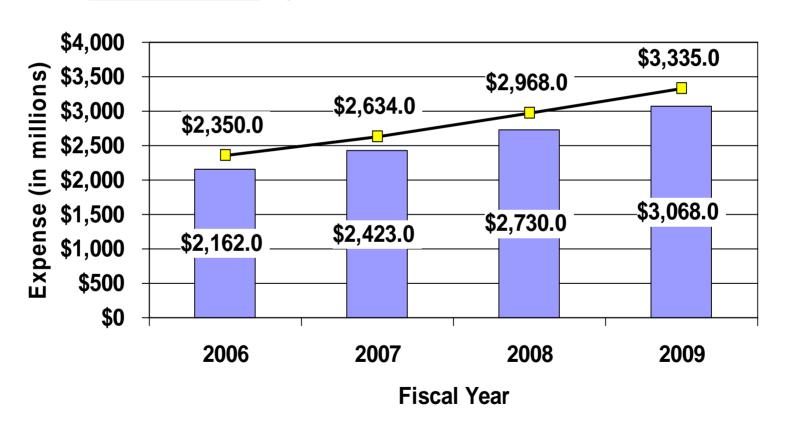
- The State Health Benefit Plan serves 641,422 people
- Provides health insurance coverage to
  - state employees
  - o school system employees
  - o retirees
  - o and their dependents
- Enrollment Growth Rate: 2.5%
- Expenditure Growth Rate: 12%

#### **Recent Changes to SHBP**

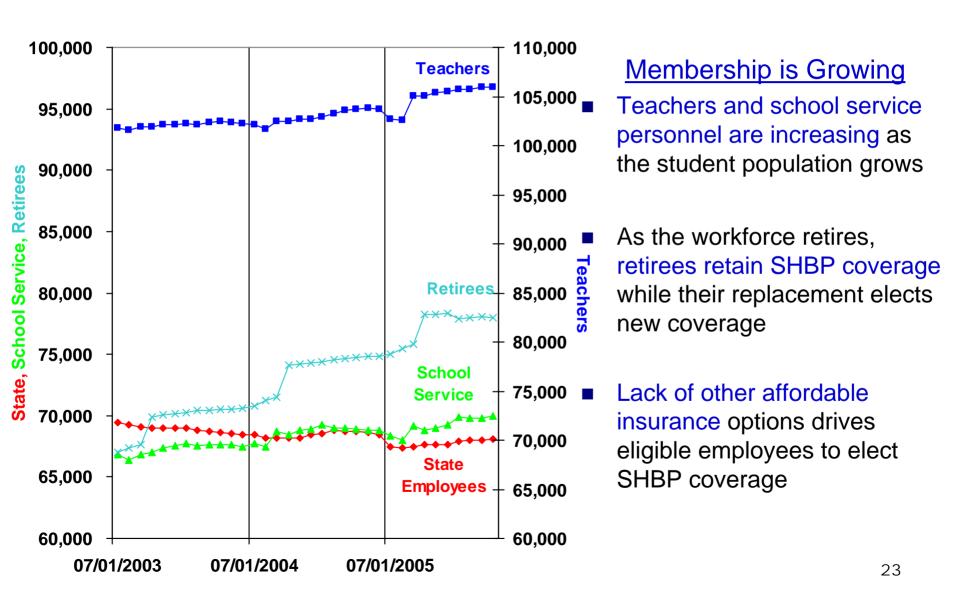
#### **FY 2005 CY 2006** Rx Design Plan Change United Healthcare administering PPO and TPA Additional Co-Pays New Consumer Directed Health Plans Medicare Part D implementation (CDHP) as Pilot Program Administrative contract Dependent audits to validate eligibility consolidation Revenue increases from state contributions and employee premiums **July 1, 2005 January 1, 2007** July 1, 2004 **January 1, 2006 FY 2006 CY 2007** HMO Cost Sharing Design Implemented Revenue increase Pharmacy Cost Sharing Increased for non-preferred from state drugs No employee •New Surcharges for smoking and spouses with access premium increases to other insurance Revenue increases from both state and employee premiums Expansion of CDHP pilots to additional payroll locations

#### **Impact of Changes on Trend**

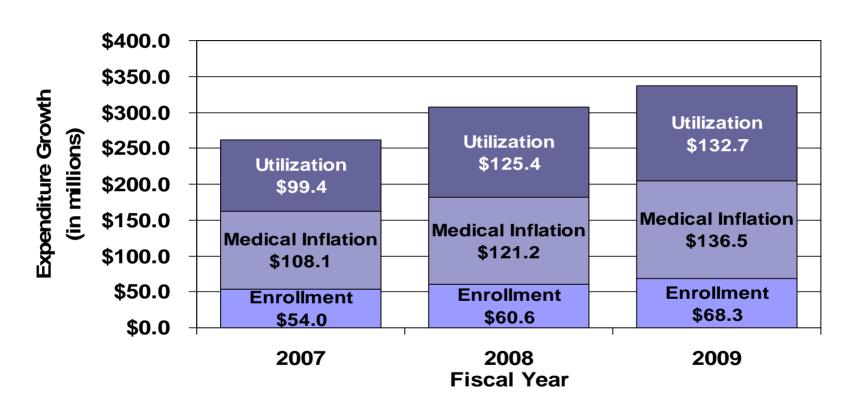
 Changes made since FY 2004 are projected to save the SHBP \$900 Million by the end of FY 2009



#### **SHBP Membership Growth**



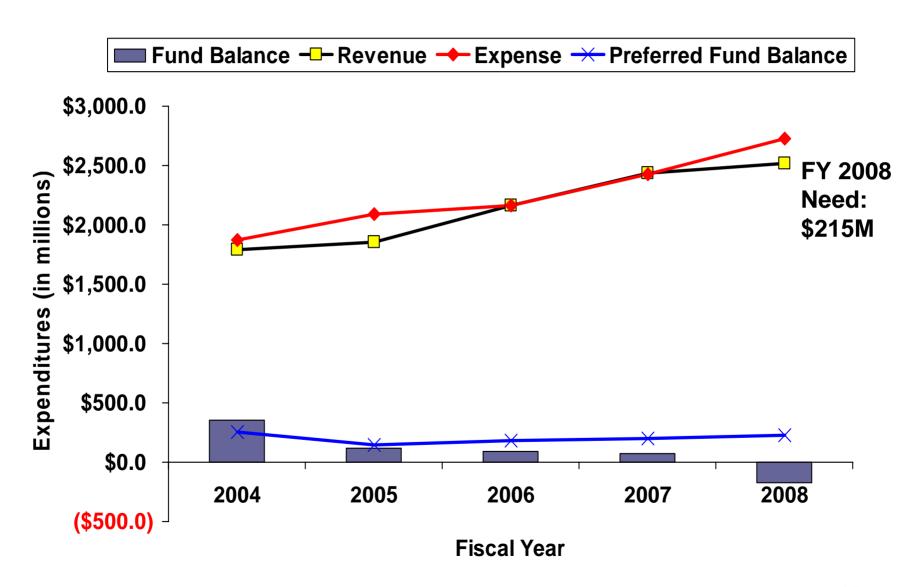




Future Opportunities for Cost Control: primarily in Utilization.

DCH has little control over medical inflation and no control over enrollment

#### **Fiscal Status**



# GOVERNOR'S BUDGET INSTRUCTIONS TO DCH



#### **DCH Budget Instructions**

- Due September 1, 2006 to Governor's Office of Planning and Budget (OPB)
- For Medicaid, PeachCare for Kids, and State Health Benefit Plan Benefit state fund needs
  - DCH may request amounts equivalent to continuation growth to cover status quo growth in program enrollment and cost
  - DCH may discuss enhancement options with the Governor during the fall



#### **Next Steps**

Board Consideration to Approve the following state fund budget submission on September 1, 2006:

Plan	FY 2007A	FY 2008		
Medicaid	-	Up to \$300M*		
PeachCare for Kids	\$12.2	\$18.3		
SHBP	-	\$215M		
* To be refined to a specific number by 9/1/06 after DCH closes FY 2006				

 Final Consideration of detailed budget request at August 24, 2006 Board Meeting

# Presentation on DCH Website

www.dch.georgia.gov

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